

PERSONAL DATA SHEET

WARNING: Any misrepresentation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal case/s against the person concerned.

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM.

Print legibly. Tick appropriate boxes () and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE.

CS Form No. 212

Revised 2017

PERSONAL INFORMATION

2. SURNAME	GUANTERO		
FIRST NAME	KHLYNDANNE JOYCE		
MIDDLE NAME	SAPDO		
3. DATE OF BIRTH (mm/dd/yyyy)	10/02/2000	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization P/s indicate country.
4. PLACE OF BIRTH	BURAUEN, LEYTE	FLIPINO If holder of dual citizenship, please indicate the details	
5. SEX	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
6. CIVIL STATUS	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	6/2-A & B House/Block/Lot No. Street ALCOBER DISTRICT 5 Subdivision/Village Barangay BURAUEN LEYTE City/Municipality Province
7. HEIGHT (m)	1.59	ZIP CODE	6516
8. WEIGHT (kg)	60		
9. BLOOD TYPE	AB	18. PERMANENT ADDRESS	6/2-A & B House/Block/Lot No. Street ALCOBER DISTRICT 5 Subdivision/Village Barangay BURAUEN LEYTE City/Municipality Province
10. GSIS ID NO.	N/A	ZIP CODE	6516
11. PAG-IBIG ID NO.	N/A		
12. PhilHEALTH NO.	N/A	19. TELEPHONE NO.	N/A
13. SSS NO.	N/A	20. MOBILE NO.	09151722206
14. TIN NO.	N/A	21. E-MAIL ADDRESS (if any)	khlygvantero02@gmail.com
15. AGENCY EMPLOYEE NO.	N/A		

FAMILY BACKGROUND

22. SPOUSE'S SURNAME	N/A		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME		NAME EXTENSION (JR, SR)	N/A	
MIDDLE NAME				
OCCUPATION	N/A			
EMPLOYER/BUSINESS NAME	N/A			
BUSINESS ADDRESS	N/A			
TELEPHONE NO.	N/A			
24. FATHER'S SURNAME	GUANTERO			
FIRST NAME	DANILO			
MIDDLE NAME	RECAMADAS			
25. MOTHER'S MAIDEN NAME				
SURNAME	SAPDO			
FIRST NAME	AQUILINA			
MIDDLE NAME	CORRALES			

(Continue on separate sheet if necessary)

EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (If not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	BURABOD ELEMENTARY SCHOOL	PRIMARY EDUCATION	2006	2012	GRADUATED	2012	7TH HONORABLE MENTION
SECONDARY	BURAUEN COMPREHENSIVE NATIONAL HIGH SCHOOL	JUNIOR HIGH SCHOOL	2012	2015	GRADUATED	2015	8TH HONORABLE MENTION
	ASIAN DEVELOPMENT FOUNDATION COLLEGE	SENIOR HIGH SCHOOL	2015	2018	GRADUATED	2018	8TH HONORABLE MENTION
VOCATIONAL / TRADE COURSE	N/A	N/A	N/A	N/A	N/A	N/A	N/A
COLLEGE	LEYTE NORMAL UNIVERSITY	BACHELOR OF SECONDARY EDUCATION - MATHEMATICS	2018	2022	GRADUATED	2022	CUM LAUDE
GRADUATE STUDIES	N/A	N/A	N/A	N/A	N/A	N/A	N/A


(Continue on separate sheet if necessary)

SIGNATURE		DATE	JUNE 8, 2023
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27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	HONOR GRADUATE ELIGIBILITY					

V. WORK EXPERIENCE

[illegible]

(Continue on separate sheet if necessary)			
SIGNATURE		DATE	JUNE 9, 2023

VOLUNTEER

Il est impossible de ne pas être intéressé par ce livre.

For the full and complete description of the program, please refer to the program manual.

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COURSE PROJECT NETWORK

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**RED CROSS YOUTH COUNCIL -
SOUTHERN LEYTE CHAPTER**

LEYTE NORMAL UNIVERSITY- RED CROSS YOUTH COUNCIL
AND RED CROSS-LEYTE CHAPTER

(Continue on separate sheet if necessary)

31	SPECIAL SKILLS and HOBBIES	32	NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33	MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	COMPUTER LITERATE				RED CROSS YOUTH COUNCIL - LEYTE CHAPTER
	PLAYING BANDURIA, PIANO, AND OCTAVINA				BURABOD ARTS GUILD - BURAUEN
	SEWING				
	PAINTING				
	EMBROIDERY				

JUNE 8, 2023

34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ Date Filed: _____ Status of Case/s: _____
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____
37. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____
39. Have you acquired the status of an immigrant or permanent resident of another country?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details (country): _____
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____

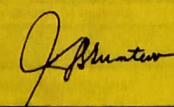
41. REFERENCES (Person not related by consanguinity or affinity to applicant/appointee)		
NAME	ADDRESS	TEL. NO.
ORESTE M. ORTEGA JR.	ALANGALANG, LEYTE	
ELMA R. SENO	BURAUEN, LEYTE	

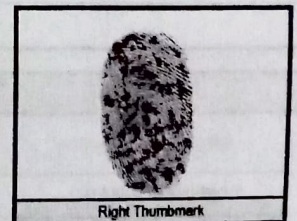
42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head/authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.



KHYLANDEE JOYCE S. GUANTERO

Government Issued ID (e.g. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance
Government Issued ID: PHILIPPINE NATIONAL ID
ID/License/Passport No.: 4896-0659-7845-1471
Date/Place of Issuance: 12/28/2021 / BURAUEN, LEYTE


Signature (Sign inside the box)
JUNE 8, 2023
Date Accomplished



Right Thumbmark

SUBSCRIBED AND SWORN to before me this 08 JUN 2023, affiant exhibiting his/her validly issued government ID as indicated above.

RAYMOND B. SAMSON PUBLIC ATTORNEY III 'REPRESENT TO RA 9406' Person Administering Oath
